

Marjory Kinnon School

Supporting Pupils with Medical Conditions Policy

July 2026



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The Key (6 October 2025) model policy (which is based on the Department for Education's statutory guidance) has been used to benchmark the school's policy.

1. Aims

At Marjory Kinnon School we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.

Our school will support pupils with medical conditions so that they have full access to education, including school trips and physical education.

This Policy aims to:

- Make sure that pupils, staff and parents understand how our school will support pupils with medical conditions.
- Set out the roles and responsibilities for everyone in the school community in regard to pupils with medical conditions.
- Set out the procedure for creating, reviewing and managing individual healthcare plans (IHPs).
- Set out how we will manage medicines in school.
- Reassure parents/carers that the school will help their child feel safe, supported and included.

The named person with responsibility for implementing this policy is Mrs Higgins, Designated Safeguarding Lead.

2. Legislations & Statutory Responsibilities

This Policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the statutory guidance on [Supporting pupils with medical conditions at school](#) and the [Early Years Foundation Stage statutory framework](#) from the Department for Education (DfE).

3. Roles & Responsibilities

3.1 The Governing Body

The Governing Body will:

- Review this policy in a timely manner, in line with the relevant legislation and requirements.

- Make sure that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition.
- Monitor practice, and staff training, in regards to pupils with medical conditions, in line with this policy.
- The governing board delegates the day-to-day implementation of this policy to the Headteacher / named person for implementing the policy (Mrs Higgins).

3.2 The Headteacher / Named Person in charge of implementing the policy

The Headteacher / named person will:

- Make sure all staff are aware of this Policy and understand their role in its implementation.
- Make sure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations.
- Make sure that all staff who need to know are aware of a child's condition.
- Take overall responsibility for the development and monitoring of individual healthcare plans (IHPs).
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs.
- Approve risk assessments for school visits and school activities outside the normal school timetable that involve provision for pupils with medical conditions.
- Contact the LBH School Nursing Service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the LBH School Nurse.
- Make sure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.
- Implement systems for obtaining information about a child's needs for medicines and keeping this information up to date.

3.3 Staff

The Medical Officer will:

- Be the first responder to medical emergencies in school.
- Administer daily medication to pupils.
- Monitor and update Individual Healthcare Plans.
- Liaise with parents regarding medical needs.
- Liaise with other healthcare professionals.
- Organise annual training for staff.
- Ensure that the school has the correct amount of medical supplies and provisions and reorder as necessary.
- Ensure that each hygiene room in the school and all first aid kits are fully stocked.

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

3.4 Parents/Carers

Parents / carers will:

- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Provide evidence of appropriate prescription and written permission for medicines to be administered by staff.
- Be involved in the development and review of their child's IHP and may be involved in its drafting.
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

3.6 LBH School Nurses & Other Healthcare Professionals

The LBH School Nursing Service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the LBH School's Nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

4. Equal Opportunities

Marjory Kinnon School will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents/carers and any relevant healthcare professionals will be consulted.

5. Being Notified that a child has a Medical Condition

When the school is notified that a pupil has a medical condition, the process outlined below (in Appendix 1) will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2-weeks, or by the beginning of the relevant term for pupils who are new to our school.

5.1 Obtaining information about medicines

The EYFS framework states that settings must include how they obtain information about a child's need for medicine, and a system for keeping this information up to date (see Section 10 of this policy).

We will:

- For new starters, send a form to all parent / carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any medicine(s) their child needs. Where a pupil has a new diagnosis and / or a pupil has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks.
- Send a reminder to parents / carers at the start of each year in a newsletter, as well as a form to complete, if their child requires certain medicine(s).

We ask that parents / carers proactively inform us by either phone call to the school [020 8890 2032] or an email to [office@mks.org.uk] if their child's medical needs change during the school year.

6. Individual Healthcare Plans (IHPs)

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. Day to day responsibility has been delegated to the Designated Safeguarding Lead, Mrs Amy Higgins.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents / carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Headteacher will make the final decision.

Plans will be drawn up in partnership with the school's Medical Officer, Debbie Lee, with the parents / carers and a relevant healthcare professional (such as the LBH School Nurse, specialist or paediatrician), who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs (SEN) but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing body and the Headteacher / role of the individual with responsibility for developing IHPs will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons.
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions.
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring.
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable.
- Who in the school needs to be aware of the pupil's condition and the support required.
- Arrangements for written permission from parents / carers and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours.
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent/carer or pupil, the designated individuals to be entrusted with information about the pupil's condition.
- What to do in an emergency, including who to contact and contingency arrangements.

7. Managing Medicines

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so and
- Where we have parents / carers' written consent

The person administering the medicine will keep a written record. Parents / carers will always be informed on the same day the medicine has been administered, or as soon as reasonably possible.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check recommended and maximum dosages for the pupil's age, and when the previous dosage was taken.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

7.1 Controlled Drugs

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

7.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents / carers and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. IHPs will include procedure for staff to follow if a pupil refuses to carry out a necessary procedure or take medicine.

7.3 Unacceptable Practice

Although school staff will use their discretion and judge each case on its merits with reference to the pupil's IHP, they will keep in mind that it is not generally acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary.
- Assume that every pupil with the same condition requires the same treatment.
- Ignore the views of the pupil or their parents/carers.
- Ignore medical evidence or opinion.
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs.
- Send an ill pupil to the school office or medical room unaccompanied or with someone unsuitable (e.g. a fellow pupil who is not old or responsible enough).
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting

issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs.

- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child.
- Administer, or ask pupils to administer, medicine in school toilets.

8. Emergency Procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupil's IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance.

9. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Designated Safeguarding Lead. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils.
- Fulfil the requirements in the IHPs.
- Help staff to have an understanding of the specific medical conditions they are being asked to support with, their implications and preventative measures.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this Policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record Keeping

Parent/Carer should tell the school in writing about the medicines that their child needs to take and provide details of any changes to the prescription or the support required.

Form B: Parents will be asked to record details of medicines in this standard format. Staff should check that any details provided by parent/carers are consistent with the instructions that are provided by the prescriber. When requesting a new supply of medication staff must send this form to a parent/carers to complete each time.

Form C: Must be completed to administer non-prescribed medication. This must be agreed by the Headteacher, a member of staff deputising for the Headteacher or the Designated Safeguarding Lead.

The Governing Body will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents/carers will be informed if their child has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

10.1 Recording information about medicines

The EYFS framework states that settings must include how they obtain information about a child's need for medicine (see Section 5 of this policy), and a system for keeping this information up to date.

We will:

- Enter each pupil's medicine need in the school's system.
- Update our records when parents/carers of pupils inform us of changes to their child's needs
- Keep a record of changes, labelling the most recent record for each child.
- Make sure that all staff have access to records so that they are informed about pupils' medical needs.

- Securely hold this information digitally in accordance with the UK GDPR.
- Inform parents/carers about how they can access their child's information (provided no relevant exemptions apply to their disclosure under the Data Protection Act 2018).

11. Liability & Indemnity

The Governing Body will ensure that the school has the appropriate level of insurance in place and appropriately reflects the school's level of risk.

Marjory Kinnon purchase insurance through the DfE Risk Protection Arrangement (RPA) for schools. Staff providing support to pupils with medical conditions and liability cover relating to the administration of medication are covered by the Employer's Liability Insurance Certificate.

12. Complaints

Parents/carers with a complaint about the school's action in regard to their child's medical condition should discuss these directly with the Headteacher / Designated Safeguarding Lead in the first instance. If the Headteacher / Designated Safeguarding Lead cannot resolve the matter, they will direct parents/carers to the school's Complaints Procedure.

13. Monitoring Arrangements

The Governing Body will review this Policy annually (or sooner if legislation changes) and assess its implementation and effectiveness.

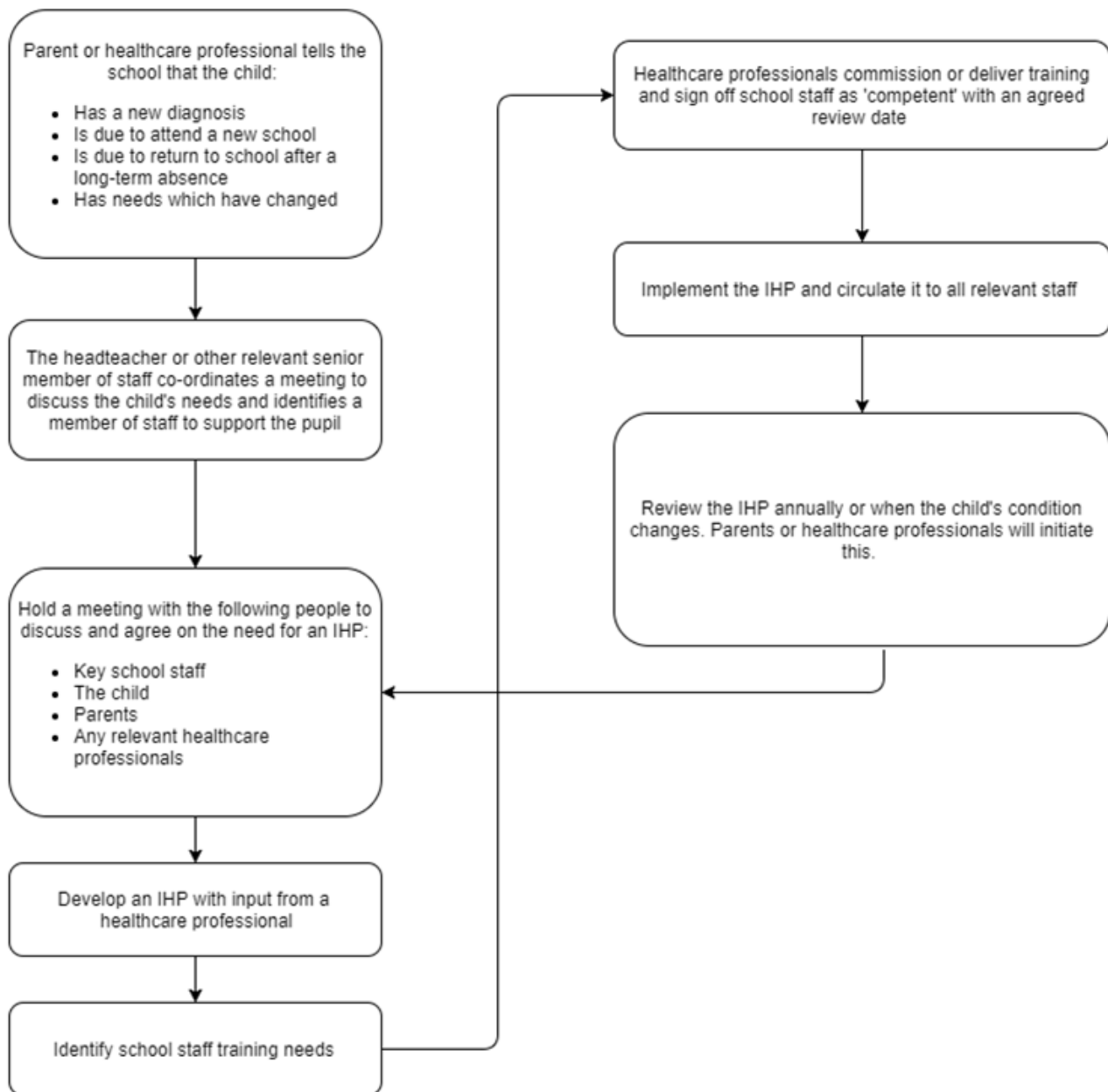
	DfE Policy Name	Supporting pupils at school with medical conditions
	Requirement	Statutory guidance for Governing Bodies of Maintained Schools
	Publish on Website	No
	Review Frequency	Changed to annual in 2020
	Document Owner	Designated Safeguarding Lead
v1	Created	January 2018
	Document Name	Supporting Pupils with Medical Conditions Policy
	Approved By	H&S/Premises & Safeguarding Committee
V2	Updated	March 2021
	Document Name	Supporting Pupils with Medical Conditions Policy
	Approved By	Full Governing Body
V3	Updated	May 2022
	Document Name	Supporting Pupils with Medical Conditions Policy
	Approved By	Moved to Safeguarding Committee (and approval reported at FGB)
V4	Updated	May 2023
	Document Name	Supporting Pupils with Medical Conditions Policy
	Approved By	Safeguarding Committee (and approval reported at FGB)
V5	Updated	July 2024
	Document Name	Supporting Pupils with Medical Conditions Policy
	Approved By	Full Governing Body
V6	Updated	July 2026
	Document Name	Supporting Pupils with Medical Conditions Policy
	Approved By	Full Governing Body

14. Links to Other Policies

This Policy links to the following policies:

- Accessibility Plan.
- Asthma Policy.
- Anaphylaxis Policy.
- Complaints Policy
- Equality, Diversity & Inclusion Policy.
- First Aid Policy.
- Health & Safety Policy.
- Safeguarding & Child Protection Policy.
- SEN Information Report
- SEND Policy.

Appendix 1 – Being Notified a Child has a Medical Condition



Appendix 2 – Individual Healthcare Plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues, etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips, etc.

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*).

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Appendix 3 – Parental Agreement for Setting to Administer Medicine

In line with the Supporting Pupils with Medical Conditions Policy, the school will not give your child medicine unless you complete and sign this form.

Date for review to be initiated by

Name of school

Name of child

Date of birth

Group/class/form

Medical condition or illness

Medicine

Name/type of medicine
(as described on the container)

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school needs to know about?

Self-administration – y/n

Procedures to take in an emergency

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to

[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the Supporting Pupils with Medical Conditions Policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Appendix 4 – Parental Agreement for School to Administer Medicine which is not a Prescribed Medicine

This must be agreed by the Headteacher / DHT / DSL

Note: Medicines must be in the original containers.

The school will not give your child medicine unless you complete and sign this form.

Name of school:	Marjory Kinnon School
Name of child:	
Medical condition or illness:	

Medicine

Name / type of medicine: (as described on the container)	
Date dispensed:	/ /
Expiry date:	/ /

Number of tablets / sachets given to school:		Signature: _____ Date: _____ Member of staff to sign & date
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How much/dose to be given:	
When to be given:	
Are there any side effects that the school needs to know about:	
Self-administration supervised:	Yes / No (<i>delete as appropriate</i>)

I understand that I must deliver the medicine to school with this information in a sealed envelope with my **child's name and class** written on it.

I understand that I must notify the school of any changes in writing.

Signature: _____	Date: _____
Print Name: _____	

Appendix 5 – Record of Medicine Administered to an Individual Child

Name of school/setting	
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

C: Record of medicine administered to an individual child (Continued)

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			

Staff initials

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Date

Time given

Dose given

Name of member of staff

Staff initials

Date

Time given

Dose given

Name of member of staff

Staff initials

Appendix 6 – Record of Medicine Administered to All Children

Name of school/setting							
Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

Appendix 7 – Staff Training Record – Administration of Medicines

Name of school/setting	
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Appendix 8 – Contacting Emergency Services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. your telephone number
2. your name
3. your location as follows [insert school/setting address]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. put a completed copy of this form by the phone

The First Aider/ Medical Officer to make the judgment call whether to call 999.

To the 999 triage: Explain clearly the current status of the patient e.g.

- The patient is (describe condition)
- We have administered (describe action) as per medical plan/ emergency first aid
- Request a time for arrival of first responders

All class telephones to be given direct access to dial 999 for use of the Medical Officer/ First Aider (to be reviewed when the NHS response is more stable).

Clarify with 999 triage:

- If they are stating that someone will not attend or there is a delay e.g. 'Can you clarify that we will not receive first responders/ambulance until (quote time they have told you).
- That you have no further medication to offer the patient (if applicable) and that there might be consequences of deterioration.

Ask for further advice e.g. 'Can you give me any further advice on how to maintain the patients' condition' or 'please tell me what I need to do next'.

Ring parents immediately and inform them that there is a delay in first responders / you do not have any more medication and there is a chance that the patient's condition might deteriorate further. If they wish to come and collect the patient and take to hospital then they can (do not tell them to do this).

Appendix 9 – Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely